PTO/SB/06 (07-06)

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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | Application or Docket Number 10/591,945 | | | ing Date 08/2006 | To be Mailed | |
|--|---|---|--------------------------------------|---|------------------|---|--|------------------------|----------|-------------------------------|------------------------|--|
| APPLICATION AS FILED – PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY | | | OTHER THAN OR SMALL ENTITY | | |
| ⊢ | FOR | | NUMBER FILED | | NUMBER EXTRA | | RATE (\$) | FEE (\$) | <u> </u> | RATE (\$) | FEE (\$) | |
| BASIC FEE (37 CFR 1,16(a), (b), or (c)) | | _ | N/A | | N/A | | N/A | 1 == (4) | ١ | N/A | (4) | |
| | SEARCH FEE (37 CFR 1.16(k), (f), | | N/A | | N/A | | N/A | | ١ | N/A | | |
| | EXAMINATION FE (37 CFR 1.16(o), (p), | E | N/A | | N/A | | N/A | | 1 | N/A | | |
| | CFR 1.16(i)) | | minus 20 = | | | | x \$ = | | OR | x s = | | |
| | EPENDENT CLAIM CFR 1.16(h)) | IS | minus 3 = * | | | | x \$ = | | 1 | x \$ = | | |
| | APPLICATION SIZE 37 CFR 1.16(s)) | FEE shee is \$2 addit | ts of pap 50 (\$125 ional 50 : | gs exceed 100 on size fee due for each on thereof. See CFR 1.16(s). | | | | | | | | |
| | MULTIPLE DEPEN | 7 CFR 1.16(j)) | | | | ı | | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | TOTAL | | ı | TOTAL | | |
| APPLICATION AS AMENDED – PART II OTHER TH/L (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY | | | | | | | | | | ER THAN ALL ENTITY | | |
| AMENDMENT | 03/06/2009 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) | |
| | Total (37 CFR 1.18()) | • 36 | Minus | ~ 25 | = 11 | | X \$26 = | 286 | OR | x s = | | |
| | Independent (37 CFR 1,16(h)) | • 3 | Minus | -3 | = 0 | | X \$110 = | 0 | OR | x s = | | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | | | |
| ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | OR | | | |
| | | | | | | | TOTAL ADD'L FEE | 286 | OR | TOTAL ADD'L FEE | | |
| | | (Column 1) | | (Column 2) | (Column 3) | | | | | | | |
| AMENDMENT | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) | |
| | Total (37 CFR 1.1801) | | Minus | ** | = | l | x \$ = | | OR | x s = | | |
| | Independent (37 CFR 1.16(h)) | | Minus | *** | | | x \$ = | | OR | x \$ = | | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | 1 | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | OR | | | |
| | | | | | | • | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | | |
| If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". | | | | | | | | | | | | |

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the USFTO to process) an application. Confidentiality is ownered by 80 USs. C. 122 and 37 CFR. 1.4. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.